COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES 135 STATE HOUSE STATION, AUGUSTA, ME 04333 207-287-4179

Te Aar	<b>Q</b> UAL	IFYING CONTR	RIBUTIONS - RECEIPT AND A	ACKNO	WLEDGEMENT		WWW.MAINE.GOV/ETH	IICS	
CANI	DIDATE'S NAI	ME:			OF	SENATE DISTRICT #			
ALL (	CONTRIBUTO	RS MUST BE FROM	M THE TOWN OR CITY OF:						
		IMPORTANT	NOTICE TO CONTRIBUTOR	RS:					
			signature and qualifying cont e for public funding from the		· · · · · ·		amed above to be		
			ning below, you affirm that you have received nothing of v						
	Date	Check/M.O.#	Contributor's Name (Please Pi	rint)	Residential Address	(No PO Box)	Contributor's Signature		
1									
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8									
	Please I	make checks an	Falsifying any info		on this form is punisha an Election Fund. Mone		signed by the contributors.		
<b>Municipal Registrars</b> : Please circle the number of each contributor who is registered to vote in the district of the candidate. Please complete the					<b>Circulators:</b> Anyone circulating this form <u>must complete and sign the statement below</u> for the contributions collected on this form to be accepted by the Commission.				
statement below by inserting the total number of contributors on this page who are registered in the district. Please also cross out any blank lines or contributors who are not registered in the candidate's district.				I, (print name), affirm that: (1) I collected the qualifying contributions, (2) to the best of my knowledge and belief, the signature is the signature of the person whose name it purports to be, (3) the contribution came from the personal funds of the contribution came from the personal funds of the contribution.					
I have verified that contributors circled above are registered to vote in the electoral division of the candidate.					tributor, and (4) I did not give anything of value to the contributor in exchange for their contribution and signature.				
Date:					re of Circulator:	Date:			
					Residential Address:				
Signature of Registrar:					wn/State/7in:		Dhana		